File with: lowa Ethics and Campaign Disclosure Board 510 E. 12th, Ste. 1A Des Moines, lowa 50319 Fax: 515-281-4073

Reset Form

FOR INSTRUCTIONS, SEE BACK OF FORM DISCLOSURE SUMMARY PAGE



	OOLOODINE 30	MINARIPAGE		
COMMITTEE NAME (Must be same as of	on Statement of Organizat	ion)		2008 JUL 21 AM 10: 58
Committee to Eleg 1	Millo Johnsto	ne Sherfi	1 1	
IMPORTANT: Indicate by # type of committee (1) Statewide/Legislative/Judge Standing for I (4) County Central Committee (5) County Cal Subdivision Candidate (8) County PAC (9)(11) Local Ballot Issue	e you are reporting for: 5 Retention Candidate (2)Star	te PAC (3)State Party	cal (Re	DR-2 DISCLOSURE REPORT Office Use Only
CANDIDATE COMMITTEES ONLY:				mm. #
Candidate Name		Political Party (if applicable)		ged In
Mille Johnstone		Democrorie		nputer
Office Sought		District (if Senate or House)		lited
SHERIFF				
Late reports are subject to possible civil and Miles Johnstow SIGNATURE OF PERSON FILING REPO		t to lowa Code sections 68B.3; 3/9- 759-/4/8		.401(3), the candidate, for a 7-/6-2008 DATE SIGNED
		IELEPHONE		
I AM FILING A Manday, 942 (report date)	y 21, 2008	REPORT FOR (1) ELECTIO Indicate by	N /(2)NON-EI y # 🚺	LECTION YEAR.
☐CHECK IF AMENDMENT TO REPORT	DATED		Local Commi	ittees, enter Date of Election
Check if this is final (termination) reports (You must continue to file reports	t and attach Notice of Diss s until a DR-3 is filed.)	solution Form DR-3.	County & Loc which Election	al Committees, enter County in on is held
STATEMENT OF	CASH ON HAND			
CASH ON HAND at the beginning of the r committee. This amount MUST of the last reporting period or mu	reporting period. (Total of	all funds held by the on hand at the end port filed.)	\$	2593.06
ADD TOTAL MONEY TAKEN IN				•
Schedule A: Cash Contributions	total (Attach Schedule A)	(*also see in-kind below)		600.08
Schedule F: Loans Received tot	•	•		
Schedule H: Total Sales of Cam	npaign Property (Attach Sc	chedule H)		
(Schedule H applies to	Candidates' Committee	es Only)		719714
		SUB-TOTAL	\$	3193.14
SUBTRACT TOTAL MONEY SF				9411
Schedule B: Expenditures total ((Attach Schedule B) (**als	o see debts and loans below	·)	2916.42
Schedule F: Loan Repayments t	total (Attach Schedule F)			
Schedule F: Loan Repayments to CASH ON HAND at the end of this reporting	ng period (if final report ba	alance must be zero)	\$	276,72
**UNPAID BILLS (From Schedule D - Atta	ach Schedule D)		\$	
IN KIND CONTRIBUTIONS (From Sched	dule E - Attach Schedule E	E)	\$	82.13
**OUTSTANDING LOANS (From Schedul	le F - Attach Schedule F)		\$	
CONSULTANT BREAKDOWN (Schedule	G Attached?)		-	YES NO
CANDIDATE COMMITTEES ONLY:				
VALUE OF CAMPAIGN PROPERTY (Fro	m Schedule H - Attach Sc	thedule H)	\$	

STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.

For Instructions, See Back of Form

COMMITTEE

CONTRIBUTIONS -- MONEY TAKEN IN

MONETARY (Rev. 07/03) RECEIPTS (Including candidate's personal funds) CHECK THIS BOX IF COMMITTEE NAME (Must be same as on Statement of Organization) AMENDING FORM TO God Mille Johnstone, Short

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED	PAC ID NUMBER (if applicable)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP	AMOUNT	√ IF FOR
(MM/DD/YR)	AND PAC CHECK		TO CANDIDATE* (if applicable)	RECEIVED	FUND- RAISER
	NUMBER	0-1-1-1			INCOME
5.18.2008		DAN + JACKY WISTROM		\$ 100.00	
J. 18. 2008	CK#	8075 - 1804 ST. SPERRY, IA 52650		700.00	-
	ID#	JAN Bac			
5-16-2008	CK#	17684 70th Ave.		50.00	
		Sperry, IA 52650		30.00	L
	ID#	DOANE THERNTON			
5-18.08	CK#	16908 Kingwood CTTS.		25.00	
	ID#	Middle TOWN =A 52638			
~ 22 110		STO DAIL HILLS Drive			
5.22.08	CK#	BURLINGTON, ZA 52601		200.00	L
	ID#	Doris VAN Win Kle	MOTHER		
5.29.08	CK#	2308 Ger ST	الماز	10000	
	104	BURLINGTON, IA 526	isw	7000	L
·1	ID#	FAM Bonk + Thus			
6.2.08	CK#	Do. Box 928, Bul.	ji	.08	L.
	ID#	INTEREST EXERCED WAYNE + JOANNIE LAYTMAN		03	
6808	CK#	4601 W. Ave			
9°7°00		BURGINGTON IN 52601		25.00	<u> </u>
	ID#	Davis Acord			
6.21.08	CK#	1114 Ash Street	ı	100.00	
	ID#	BURLING-TON, ZA SZEGI	 	700.00	,
	CK#				<u>L</u>
	ID#				
	CK#				
			SUB-TOTAL	CAA AR	

TOTAL (if last page of this schedule)

SCHEDULE

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Reset Form

^{*} Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

EXPENDITURES - MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURE:		
	CK THIS BOX IF		

COMMITTEE N	IAME	(Must be	same as on Statement of Org	anization)
Commoner	É.	Elect	Millo Johnstone	Sheritt

DATE EXPENDED	CANDIDATE ID NUMBER (if applicable)	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
(MM/DD/YR)	AND PAC CHECK NUMBER			
5.19.2008	ID# CK#	Mediapius News G16 Main M-1	Ad	\$46.80
	ID#	Medispain ZA 5263>		
5.23.208	CK#	GIB MAIN Mediapui, #A 5260	Ad	29.25
	ID#	Best Bay		
5.24.68	CK#	BOST BUY CORALUILE, JA 52241	PRINTER INK	83.73
	ID#			
5-27.18	CK#	STAPLES 104 W. AGENCY ST. W. BURLINGTO	PRINTER INK	177.60
5.28.08	ID# CK#	TITAN BRUND (ASTING 1411 N. POOSEVELT ARE BURLINGTON, IT SZLI	RANIO Als	1,392.00
	ID#	TITAN BENADOSTING		
5.28.08	CK#	BYRLINGTH =A	Radio Ads	38.00
	ID#			
5.30.18	CK#	The HAWIC-By 800 S. MAIN BURLINGTON, #A	Ad	330.24
	ID#	STAPLET		
5.29.18	CK#	101 W. AGENCY ST.	PRINTER INK	88.80
			SUB-TOTAL	\$ 2236.42

TOTAL (if last page of this schedule)

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

Page

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388		17.5		12.6
Bearing 6	expedient.	and the	ar imen	355

EXPENDITURES - MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
CHEC	CK THIS BOX IF

AMENDING FORM

COMMITTEE NAME	(Must be same as or	n Statement of Organization)
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COMMITTEE TO ELECT Mills Johnstone, Sherite

Committee		T /11-16 JOHNSTONE, Shel	£'¬'	
DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
	ID#	Paralle and Committee		
5.30.08	CK# /0/8	PRITCHARD BRUAD CASTING 2550 MT. PLEASANT ST. BURLINGTON, ZA SZECH	Radio Ads	\$275.10
	ID#	KCPS Radio		
5.30.08	CK# _{/Oi 9}	205 S. GEAR AR BURLINGTON -	RADIO Ads	120.00
	ID#	Oos Moines Co. News		
5.30.08	CK# /020	W. BURGALURY	Ads	76.50
	ID#	Medisoni New		
6.9.68	7021	Mediaphis News GIG MAIN Mediaphin #A	Trank-gor Ad	35.10
	ID#	CAROTAL DAF		
6 24.08	CK# /022	CAPTINE ONE STAPLES 104W. Agency, W. Burc.	COPY TONER	153.00
	ID#	Des Moine, G. Mar		
7.14.09	CK# /023	W. BURLNOW	Thomas-gon Ad	20.40
	ID#			
	CK#			
	ID#			
	1 <i>0</i> 11			
	CK#			

SUB-TOTAL

\$ 680.00

TOTAL (if last page of this schedule)

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail iternized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

Page 2 of 2

COMMITTEE NAME (Must be same as on Statement of Organization)	SCHEDULE E (Rev. 06/97)	IN-KIND
Committee to Class Mills Johnstone, Shoriff Roset Form		K THIS BOX IF DING FORM

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	√ IF FOR FUND-RAISER CONTRIBUTION
5.15.08	Mike Johnstove- 17083 Kingwood GTIMES De. Middlotown, IA 52638	Seci=	PUST CAPOS	\$2.10	
5.15.08	- 117 122 10000 2 7 3 26 30	300	fuel	60.63	
5.6.08	MIKE JOHNSTORE 17083 KINGWOOD ESTS DA. MIDDLETOWN ZA 52638	Self	VOTER LIST From And to	20.00	
			1		
			SUB-TOTAL TOTAL (if last page of this schedule)	\$82.13 \$	

*Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

of _____(for Schedule E)

CONTRIBUTIONS